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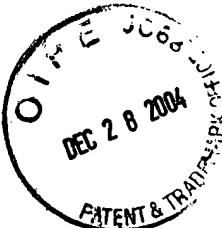
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7590 10/01/2004

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(Deposit)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION
10/721,206	11/25/2003	Robert T. Sanders	RPS920030127US1	5506

TITLE OF INVENTION: PROTECTIVE SYMMETRICAL PACKAGING PREFORM METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	01/03/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
TAWFIK, SAMEH	3721	493-051000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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1 Joscelyn G. Cockburn

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recorded as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

INTERNATIONAL BUSINESS
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov

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Joscelyn G. Cockburn

Date 11/16/04

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